Case 16-04634 Doc 1 Filed 02/15/16 Entered 02/15/16 13:08:58 Desc Main Document Page 1 of 50

| Fill in this information to identify your case: |                                 |                                   |
|---|---------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                   |
| Case number (if known)                          | _ Chapter you are filing under: |                                   |
|   | ■ Chapter 7                     |                                   |
|   | ☐ Chapter 11                    |                                   |
|   | ☐ Chapter 12                    |                                   |
|   | ☐ Chapter 13                    | ☐ Check if this an amended filing |

B 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| 11: Identify Yourself  |   |   |  |
|--|---|---|--|
|  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |
| Your full name   |   |   |  |
| Write the name that is on  | Axel  |   |  |
| your government-issued   | First name  | First name  | _  |
| example, your driver's   | E.  |   |  |
| license or passport).  | Middle name   | Middle name   | _  |
| Bring your picture   | Denk  |   |  |
|  | Last name and Suffix (Sr., Jr., II, III)  | Last name and Suffix (Sr., Jr., II, III)  | _  |
| •  |   |   |  |
| All other names you have used in the last 8 years  |   |   |  |
| Include your married or maiden names.  |   |   |  |
| Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-9919   |   |  |
|  | Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Axel  First name  E.  Middle name  Denk  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  xxx-xx-9919 | About Debtor 1:  About Debtor 2 (Spouse Only in a Joint Case):  Write the name that is on your government-issued picture identification to your meeting with the trustee.  Axel  First name  E.  Middle name  Denk  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  Axel  First name  First name  Middle name  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Axel  First name  Last name  Axel  First name  Last name  Middle name  Last name and Suffix (Sr., Jr., II, III) |

Debtor 1 Axel E. Denk

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Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 6434 N. Richmond St.,   | If Debtor 2 lives at a different address:   |
|    |  | Apt. 3 Chicago, IL 60645 Number, Street, City, State & ZIP Code Cook  | Number, Street, City, State & ZIP Code  |
|    |  | County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                               | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |
|    |  |   |   |

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Case number (if known)

| ar         | t 2: Tell the Court About  | Your Bank  | ruptcy C    | ase  |  |                     |                           |                       |  |
|------------|--|--|-------------|--|--|---------------------|---------------------------|-----------------------|--|
| <b>'</b> . | The chapter of the Bankruptcy Code you are   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7 |             |  |  |                     |                           |                       |  |
|            | choosing to file under   |  |             |  |  |                     |                           |                       |  |
|            |  | ☐ Chapter 11   |             |  |  |                     |                           |                       |  |
|            |  | ☐ Chapt  | ter 12      |  |  |                     |                           |                       |  |
|            |  | ☐ Chapt  |             |  |  |                     |                           |                       |  |
|            |  |  |             |  |  |                     |                           |                       |  |
| 3.         | How you will pay the fee   | abo  | out how you | e entire fee when I file my<br>ou may pay. Typically, if your<br>r attorney is submitting your<br>I address. | are paying the fe                      | e yourself, you ma  | ay pay with cash, cashi   | ier's check, or money |  |
|            |  |  |             | ny the fee in installments. In ee in Installments (Official Fe   |  | option, sign and a  | ttach the Application fo  | or Individuals to Pay |  |
|            |  | ☐ I re   | equest the  | at my fee be waived (You r<br>quired to, waive your fee, an<br>to your family size and you a                 | nay request this o<br>d may do so only | if your income is l | ess than 150% of the c    | official poverty line |  |
|            |  | out  | the Appl    | ication to Have the Chapter  | 7 Filing Fee Waiv                      | ed (Official Form ? | 103B) and file it with yo | our petition.         |  |
| ).         | Have you filed for   | ■ No.  |             |  |  |                     |                           |                       |  |
|            | bankruptcy within the last 8 years?  | ☐ Yes.   |             |  |  |                     |                           |                       |  |
|            | •  |  | District    |  | When                                   |                     | Case number               |                       |  |
|            |  |  | District    |  | When                                   |                     | Case number               |                       |  |
|            |  |  | District    |  | When                                   |                     | Case number               |                       |  |
| 0.         | Are any bankruptcy   | ■ No   |             |  |  |                     |                           |                       |  |
|            | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes.   |             |  |  |                     |                           |                       |  |
|            |  |  | Debtor      |  |  | F                   | Relationship to you       |                       |  |
|            |  |  | District    |  | When                                   | 0                   | Case number, if known     |                       |  |
|            |  |  | Debtor      |  |  | F                   | Relationship to you       |                       |  |
|            |  |  | District    |  | When                                   | (                   | Case number, if known     |                       |  |
| 1.         | Do you rent your   | □ No.  | Go to       | line 12.   |  |                     |                           |                       |  |
|            | residence?   | Yes.   | Has y       | our landlord obtained an evi   | ction judgment ag                      | ainst you and do y  | ou want to stay in you    | r residence?          |  |
|            |  |  |             | No. Go to line 12.   |  |                     |                           |                       |  |
|            |  |  |             | Yes. Fill out <i>Initial Stateme</i> bankruptcy petition.  | ent About an Evict                     | ion Judgment Aga    | ainst You (Form 101A)     | and file it with this |  |

Debtor 1 Axel E. Denk

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| Deb | tor 1                            | Axel E. Denk  |                        | D0C 1              |   | e 4 of 50  Case number (if known)  | 2/15/16 12:49PM                      |
|-----|----------------------------------|---|------------------------|--------------------|---|--|--------------------------------------|
| Par | t 3:                             | Report About Any Bus  | sinesses `             | You Own a          | as a Sole Proprietor  |  |                                      |
| 12. | of an                            | ou a sole proprietor<br>by full- or part-time<br>ness?  | ■ No.                  | Go to F            | art 4.  |  |                                      |
|     |                                  |   | ☐ Yes.                 | Name a             | and location of business  |  |                                      |
|     | busin<br>an ind<br>separ<br>as a | e proprietorship is a<br>less you operate as<br>dividual, and is not a<br>rate legal entity such<br>corporation,<br>ership, or LLC. |                        | Name (             | of business, if any   |  |                                      |
|     | If you sole                      | i have more than one proprietorship, use a rate sheet and attach  |                        | Numbe              | r, Street, City, State & ZIP Code                                     |  |                                      |
|     |                                  | his petition.   |                        | Check              | the appropriate box to describe yo                                    | our business:  |                                      |
|     |                                  |   |                        |                    | Health Care Business (as defined                                      | l in 11 U.S.C. § 101(27A))   |                                      |
|     |                                  |   |                        |                    | Single Asset Real Estate (as defin                                    | ned in 11 U.S.C. § 101(51B))   |                                      |
|     |                                  |   |                        |                    | Stockbroker (as defined in 11 U.S                                     | S.C. § 101(53A))   |                                      |
|     |                                  |   |                        |                    | Commodity Broker (as defined in                                       | 11 U.S.C. § 101(6))  |                                      |
|     |                                  |   |                        |                    | None of the above   |  |                                      |
| 13. | Chap<br>Bank                     | rou filing under<br>oter 11 of the<br>cruptcy Code and are<br>a small business<br>or?   | deadlines<br>operation | s. If you inc      | licate that you are a small busines w statement, and federal income t | w whether you are a small business destroying the work of the second and the work of the second and the work of the second and | recent balance sheet, statement of   |
|     | For a                            | definition of small   | ■ No.                  | I am no            | ot filing under Chapter 11.   |  |                                      |
|     |                                  | ness debtor, see 11<br>C. § 101(51D).   | □ No.                  | I am fili<br>Code. | ng under Chapter 11, but I am NC                                      | T a small business debtor according  | to the definition in the Bankruptcy  |
|     |                                  |   | ☐ Yes.                 | I am fili          | ng under Chapter 11 and I am a s                                      | mall business debtor according to the  | e definition in the Bankruptcy Code. |
| Par | t 4:                             | Report if You Own or  | Have Any               | Hazardou           | s Property or Any Property Tha  | t Needs Immediate Attention  |                                      |
| 14. |                                  | ou own or have any  | ■ No.                  |                    |   |  |                                      |
|     |                                  | erty that poses or is ed to pose a threat   | ☐ Yes.                 |                    |   |  |                                      |
|     | _                                | minent and  | <b>—</b> 103.          | What is th         | ne hazard?  |  |                                      |

identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Axel E. Denk

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Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About D | ebtor 1 | : |
|---------|---------|---|
|---------|---------|---|

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions about finances. about illianood.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rec | eive a briefing about credit |
|--------------------------|------------------------------|
| counseling because of:   |                              |

I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Axel E. Denk

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| Par | 6: Answer These Questi   | ons for Re                                       | porting Purposes   |   |   |  |  |  |  |
|-----|--|--|--|---|---|--|--|--|--|
| 16. | What kind of debts do you have?                                |  |  | consumer debts? Consumer debts are de ersonal, family, or household purpose."   | fined in 11 U.S.C. § 101(8) as "incurred by an  |  |  |  |  |
|     |  |  | ☐ No. Go to line 16b.  |   |   |  |  |  |  |
|     |  |  | Yes. Go to line 17.  |   |   |  |  |  |  |
|     |  |  | b. <b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. |   |   |  |  |  |  |
|     |  |  | ☐ No. Go to line 16c.  |   |   |  |  |  |  |
|     |  |  | ☐ Yes. Go to line 17.  |   |   |  |  |  |  |
|     |  | 16c.   | State the type of debts you  | u owe that are not consumer debts or busine   | ess debts   |  |  |  |  |
| 17. | Are you filing under<br>Chapter 7?                             | □ No.  | I am not filing under Chapt  | ter 7. Go to line 18.   |   |  |  |  |  |
|     | Do you estimate that after any exempt property is excluded and |  |  | <ol> <li>Do you estimate that after any exempt prods will be available to distribute to unsecure</li> </ol>               |   |  |  |  |  |
|     | administrative expenses are paid that funds will               |  | ■ No   |   |   |  |  |  |  |
|     | be available for distribution to unsecured creditors?          |  | □ Yes  |   |   |  |  |  |  |
| 18. | How many Creditors do you estimate that you owe?               | ■ 1-49<br>□ 50-99<br>□ 100-19<br>□ 200-99        |  | ☐ 1,000-5,000<br>☐ 5001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000   |  |  |  |  |
| 19. | How much do you estimate your assets to be worth?              | □ \$100,0  | 50,000<br>1 - \$100,000<br>01 - \$500,000<br>01 - \$1 million  | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |  |  |  |  |
| 20. | How much do you estimate your liabilities to be?               | □ \$100,0  | 50,000<br>01 - \$100,000<br>01 - \$500,000<br>01 - \$1 million   | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |  |  |  |  |
| Par | 7: Sign Below  |  |  |   |   |  |  |  |  |
| For | you  |  | , ,  | declare under penalty of perjury that the info  | •   |  |  |  |  |
|     |  |  |  | e relief available under each chapter, and I  |   |  |  |  |  |
|     |  |  |  | id not pay or agree to pay someone who is rethe notice required by 11 U.S.C. § 342(b).                                    | not an attorney to help me fill out this  |  |  |  |  |
|     |  | I request r                                      | elief in accordance with th  | e chapter of title 11, United States Code, sp   | pecified in this petition.  |  |  |  |  |
|     |  | I understa<br>bankruptc<br>1519, and<br>/s/ Axel | y case can result in fines υ<br>3571.  | ent, concealing property, or obtaining money<br>up to \$250,000, or imprisonment for up to 20                             | or property by fraud in connection with a pyears, or both. 18 U.S.C. §§ 152, 1341,  |  |  |  |  |
|     |  | Axel E. [  |  | Signature of Debt   | or 2  |  |  |  |  |
|     |  | Executed   | on February 15, 2016<br>MM / DD / YYYY   |   | M / DD / YYYY   |  |  |  |  |

Debtor 1 Axel E. Denk

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David M. Siegel                    | Date          | February 15, 2016 |
|--|---------------|-------------------|
| Signature of Attorney for Debtor       | _             | MM / DD / YYYY    |
| David M. Siegel                        |               |                   |
| Printed name                           |               |                   |
| David M. Siegel & Associates           |               |                   |
| Firm name                              |               |                   |
| 790 Chaddick Drive                     |               |                   |
| Wheeling, IL 60090                     |               |                   |
| Number, Street, City, State & ZIP Code |               |                   |
| Contact phone <b>(847) 520-8100</b>    | Email address |                   |
| #06207611                              |               |                   |
| Bar number & State                     |               |                   |

|                     |                         | Documer             | nt Page 8 of 50 |   | 2/15/16 12:49PM                |
|---------------------|-------------------------|---------------------|-----------------|---|--------------------------------|
| Fill in this inform | nation to identify your | case:               |                 |   |                                |
| Debtor 1            | Axel E. Denk            |                     |                 |   |                                |
|                     | First Name              | Middle Name         | Last Name       | _ |                                |
| Debtor 2            |                         |                     |                 |   |                                |
| (Spouse if, filing) | First Name              | Middle Name         | Last Name       | _ |                                |
| United States Ba    | nkruptcy Court for the: | NORTHERN DISTRICT O | F ILLINOIS      |   |                                |
| Case number         |                         |                     |                 | _ | eck if this is an ended filing |
|                     |                         |                     |                 |   | -                              |
|                     |                         |                     |                 |   |                                |

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Par | 11: Summarize Your Assets  |              |                          |
|-----|--|--------------|--------------------------|
|     |  | Your a       | ssets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$           | 0.00                     |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 19,401.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 19,401.00                |
| Par | t 2: Summarize Your Liabilities  |              |                          |
|     |  |              | abilities<br>t you owe   |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 26,273.00                |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 0.00                     |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 26,104.00                |
|     | Your total liabilities   | \$           | 52,377.00                |
| Par | t 3: Summarize Your Income and Expenses  |              |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 4,276.00                 |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 4,276.00                 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |              |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | our other so | chedules.                |
| 7.  | ■ Yes What kind of debt do you have?   |              |                          |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for   | a personal   | l, family, or            |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Ocopy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Axel E. Denk

| From Part 4 on Schedule E/F, copy the following:   | Total | claim |
|--|-------|-------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$    | 0.00  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$    | 0.00  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$    | 0.00  |
| 9d. Student loans. (Copy line 6f.)   | \$    | 0.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$    | 0.00  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$   | 0.00  |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$    | 0.00  |

Desc Main Case 16-04634 Doc 1 Filed 02/15/16 Entered 02/15/16 13:08:58 Document Page 10 of 50 Fill in this information to identify your case and this filing: Debtor 1 Axel E. Denk Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse, if filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Mercury Make: Who has an interest in the property? Check one. the amount of any secured claims on Schedule D: Villager Model Debtor 1 only Creditors Who Have Claims Secured by Property. 2000 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$325.00 \$325.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Honda 3.2 Make: Who has an interest in the property? Check one. the amount of any secured claims on Schedule D: Civic SI Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2014 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another **Honda Corporation** \$16,550.00 \$16,550.00 Secured Lien \$26,723.00 ☐ Check if this is community property Co-signer has auto and makes the payments (see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

Desc Main Case 16-04634 Doc 1 Filed 02/15/16 Entered 02/15/16 13:08:58 Document Page 11 of 50 Case number (if known) Debtor 1 Axel E. Denk 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$16,875.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Household Goods & Furniture** \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$300.00 **TV & Electronics** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ■ No ☐ Yes. Describe..... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

\$600.00

Document Page 12 of 50 Case number (if known) Debtor 1 Axel E. Denk Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **US Bank** Checking/Savings \$500.00 17.1. Checking/Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No. ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☐ Yes. Give specific information about them...

Desc Main Case 16-04634 Doc 1 Filed 02/15/16 Entered 02/15/16 13:08:58 Page 13 of 50 Document Case number (if known) Debtor 1 Axel E. Denk 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Whole Life Insurance Michael C Denk (son) Michael Denk (Son) \$1,426.00 Age 41 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$1,926.00

| Debto        | or 1          | Axel E. Denk   | Document               | Page 14 of              | Case number (if known)       | 2/15/16 12:49PI                         |
|--------------|---------------|--|------------------------|-------------------------|------------------------------|---|
| Part 5       | Des           | scribe Any Business-Related Property You Ov  | vn or Have an Interest | In. List any real estat | e in Part 1.                 |   |
| 7. <b>Do</b> | you o         | wn or have any legal or equitable interest in a  | any business-related p | roperty?                |                              |   |
| <b>I</b>     | No. Go        | to Part 6.   |                        |                         |                              |   |
|              | Yes. G        | to to line 38.   |                        |                         |                              |   |
|              |               |  |                        |                         |                              |   |
| Part 6       |               | scribe Any Farm- and Commercial Fishing-Re<br>ou own or have an interest in farmland, list it in Pa          |                        | vn or Have an Interest  | t In.                        |   |
| 6. <b>D</b>  | o you         | own or have any legal or equitable into  | erest in any farm- o   | r commercial fishi      | ng-related property?         |   |
| _            |               | Go to Part 7.  | •                      |                         | ,                            |   |
|              |               | Go to line 47.   |                        |                         |                              |   |
| _            | <b>_</b> 163. | Go to line 47.   |                        |                         |                              |   |
|              |               |  |                        |                         |                              | Current value of the                    |
|              |               |  |                        |                         |                              | portion you own?  Do not deduct secured |
|              |               |  |                        |                         |                              | claims or exemptions.                   |
|              |               |  |                        |                         |                              |   |
| Part 7:      | Dog           | scribe All Property You Own or Have an Intere  | oot in That You Did No | t Liet Above            |                              |   |
| ait /        | . Des         | scribe All Property Tou Own of Have all littere  | st III That Tou Diu No | LIST ADOVE              |                              |   |
| 3. <b>D</b>  | o you         | have other property of any kind you di   | d not already list?    |                         |                              |   |
|              |               | oles: Season tickets, country club member  |                        |                         |                              |   |
|              | No            |  |                        |                         |                              |   |
|              | Yes.          | Give specific information  |                        |                         |                              |   |
|              |               |  |                        |                         |                              |   |
| 54.          | Add t         | he dollar value of all of your entries from  | m Part 7. Write that   | number here             |                              | \$0.00                                  |
|              |               | ·  |                        |                         |                              |   |
| Part 8:      | Lis           | t the Totals of Each Part of this Form   |                        |                         |                              |   |
|              |               |  |                        |                         |                              |   |
| 55. I        | Part 1        | : Total real estate, line 2  |                        |                         |                              | \$0.00                                  |
| 56. I        | Part 2        | : Total vehicles, line 5   |                        | \$16,875.00             |                              |   |
| 57. l        | Part 3        | : Total personal and household items,  | line 15                | \$600.00                |                              |   |
| 58. I        | Part 4        | : Total financial assets, line 36  | _                      | \$1,926.00              |                              |   |
| 59. I        | Part 5        | : Total business-related property, line  | 45<br>—                | \$0.00                  |                              |   |
| 20 1         | D 0           | . Total farms and fishing valeted property   |                        | \$0.00                  |                              |   |
|              |               | <ul> <li>Total farm- and fishing-related proper</li> <li>Total other property not listed, line 54</li> </ul> | _                      | \$0.00                  |                              |   |
| ו. ו         | raft /        | . Total other property not listed, line 54   | *                      | \$0.00                  |                              |   |
| 62. <b>.</b> | Total         | personal property. Add lines 56 through  | 61                     | \$19,401.00             | Copy personal property total | \$19,401.00                             |
|              |               |  |                        |                         |                              |   |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$19,401.00

Page 15 of 50 Document Fill in this information to identify your case: Debtor 1 Axel E. Denk Middle Name First Name Last Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim |   | Specific laws that allow exemption |
|--|--------------------------------------|-----------------------------------|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Che                               | eck only one box for each exemption.                            |                                    |
| 2000 Mercury Villager Line from Schedule A/B: 3.1                                      | \$325.00                             |                                   | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Ellie II olii ochodale 74 B. G.T   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2014 Honda Civic SI<br>Honda Corporation   | \$16,550.00                          |                                   | \$0.00  | 735 ILCS 5/12-1001(b)              |
| Secured Lien \$26,723.00   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Co-signer has auto and makes the payments  |                                      |                                   | . , ,,,   |                                    |
| Line from Schedule A/B: 3.2  |                                      |                                   |   |                                    |
| Household Goods & Furniture Line from Schedule A/B: 6.1                                | \$300.00                             |                                   | \$300.00  | 735 ILCS 5/12-1001(b)              |
|  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| TV & Electronics Line from Schedule A/B: 7.1   | \$300.00                             |                                   | \$300.00  | 735 ILCS 5/12-1001(b)              |
| Line nom <i>Schedule A/D. 1</i> .1   |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |

Case 16-04634 Doc 1 Filed 02/15/16 Entered 02/15/16 13:08:58 Desc Main 2/15/16 12:49PM Document Page 16 of 50 Axel E. Denk Debtor 1 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Schedule A/B Check only one box for each exemption. Checking/Savings: US Bank 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Checking/Savings Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Whole Life Insurance 735 ILCS 5/12-1001(b) \$1,426.00 \$1,426.00 Michael C Denk (son) Age 41 100% of fair market value, up to Beneficiary: Michael Denk (Son) any applicable statutory limit Line from Schedule A/B: 31.1 ? ses filed on or after the date of adjustment.) No

| 3. | Are you claiming a homestead exemption of more than \$155,675           |
|----|---|
|    | (Subject to adjustment on 4/01/16 and every 3 years after that for case |

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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2/15/16 12:49PM Page 17 of 50 Document Fill in this information to identify your case: Debtor 1 Axel E. Denk Middle Name First Name Last Name Debtor 2 Middle Name First Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much Amount of claim Value of collateral Unsecured that supports this as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the portion value of collateral. \$26,273.00 **American Honda Finance** Describe the property that secures the claim: \$16,550.00 \$9,723.00 Creditor's Name 2014 Honda Civic SI **Honda Corporation** Secured Lien \$26,723.00 Co-signer has auto and makes the payments As of the date you file, the claim is: Check all that 2170 Point Blvd., Ste. 100 Elgin, IL 60123 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit At least one of the debtors and another ☐ Check if this claim relates to a **Purchase** Other (including a right to offset) community debt Money Security Date debt was incurred Last 4 digits of account number 8843 Add the dollar value of your entries in Column A on this page. Write that number here: \$26,273.00 If this is the last page of your form, add the dollar value totals from all pages. \$26,273.00 Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name Address **American Honda Finance** On which line in Part 1 did you enter the creditor? 2.1 1220 Old Alpharetta Rd., Ste. 190 Last 4 digits of account number

Official Form 106D

Alpharetta, GA 30005

Desc Main Case 16-04634 Doc 1 Filed 02/15/16 Entered 02/15/16 13:08:58 2/15/16 12:49PM Page 18 of 50 Document Fill in this information to identify your case: Debtor 1 Axel E. Denk Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of 4.1

|   | Ραπ 2.   |   | Total cl | aim      |
|---|--|---|----------|----------|
|   | AMEX  Nonpriority Creditor's Name                                      | Last 4 digits of account number 1002  | \$       | 1,848.00 |
|   | Bankruptcy Department PO Box 981535                                    | When was the debt incurred?   |          |          |
|   | El Paso, TX 79998-1535<br>Number Street City State Zlp Code            | As of the date you file, the claim is: Check all that apply   |          |          |
|   | Who incurred the debt? Check one.  Debtor 1 only                       | ☐ Contingent  |          |          |
|   | ☐ Debtor 2 only  | ☐ Unliquidated  |          |          |
|   | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |          |          |
|   | ☐ Check if this claim is for a community debt                          | ☐ Student loans   |          |          |
|   | Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |          |
|   | No   | $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts                         |          |          |
|   | Yes  | Other. Specify Purchases  |          |          |
| _ | Cabela's Visa Center   | Last 4 digits of account number 0688  | \$       | 1,433.00 |
|   | Nonpriority Creditor's Name World's Foremost Bank                      | When was the debt incurred?   |          |          |

Official Form 106 E/F

PO Box 82609

Lincoln, NE 68501-2609 Number Street City State Zlp Code

As of the date you file, the claim is: Check all that apply

Entered 02/15/16 13:08:58 Case 16-04634 Doc 1 Filed 02/15/16 Desc Main Document Page 19 of 50 Case number (if know) Debtor 1 Axel E. Denk Who incurred the debt? Check one. Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify 4.3 Cap One 1670 122.00 Last 4 digits of account number \$ Nonpriority Creditor's Name Bankruptcy Dept. When was the debt incurred? 6/15 PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ■ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify 4.4 2,457.00 Citi 2339 Last 4 digits of account number Nonpriority Creditor's Name **Attn: Bankruptcy Department** When was the debt incurred? PO Box 6241 Sioux Falls, SD 57717 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

4.5 **Discover Bank** Nonpriority Creditor's Name

☐ Yes

Last 4 digits of account number

1,718.00

PO Box 15316 Wilmington, DE 19850

Other. Specify

**Purchases** 

2456

Page 2 of 6

Entered 02/15/16 13:08:58 Case 16-04634 Doc 1 Filed 02/15/16 Desc Main Page 20 of 50 Document Case number (if know) Debtor 1 Axel E. Denk Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify 4.6 **GECRB/SAMD** 0011 2.718.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 981416 When was the debt incurred? El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify 4.7 **GECRB/SAMD** 5252 4.087.00 Last 4 digits of account number \$ Nonpriority Creditor's Name When was the debt incurred? PO Box 981416 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent

■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Purchases** Other. Specify

Nonpriority Creditor's Name

**GECRB/Walmart** 

9876

4.8

Entered 02/15/16 13:08:58 Case 16-04634 Doc 1 Filed 02/15/16 Desc Main Document Page 21 of 50 Case number (if know) Debtor 1 Axel E. Denk When was the debt incurred? Attn: Bankruptcy Po Box 965060 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify 4.9 8.122.00 **US Bank** 4286 Last 4 digits of account number Nonpriority Creditor's Name 425 Walnut St. When was the debt incurred? Cincinnati, OH 45202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Purchases** Other. Specify 4.10 **US Bank** 1262 1,506.00 Last 4 digits of account number \$ Nonpriority Creditor's Name 425 Walnut St. When was the debt incurred? Cincinnati, OH 45202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? lacksquare Obligations arising out of a separation agreement or divorce that you did

□ Obligations arising out or a separation agreement or divorce that not report as priority claims
□ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes ☐ Other. Specify Purchases

4.11 Worlds Foremost Bank N

Last 4 digits of account number

1982

1,432.00

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Case number (if know)

| Nonpriority Creditor's Name Po Box 82608 Lincoln, NE 68521 | When was the debt incurred? 4/14  |
|--|---|
| Number Street City State Zlp Code                          | As of the date you file, the claim is: Check all that apply   |
| Who incurred the debt? Check one.                          | ☐ Contingent  |
| Debtor 1 only  |   |
| ☐ Debtor 2 only  | ☐ Unliquidated  |
| ☐ Debtor 1 and Debtor 2 only                               | ☐ Disputed  |
| ☐ At least one of the debtors and another                  | Type of NONPRIORITY unsecured claim:  |
| ☐ Check if this claim is for a community debt              | ☐ Student loans   |
| Is the claim subject to offset?                            | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |
| No   | ☐ Debts to pension or profit-sharing plans, and other similar debts   |
| Yes  | Other. Specify Purchases  |
| trying to collect from you for a debt you owe to se        | d about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is omeone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have |
| any debts in Parts 1 or 2, do not fill out or submit       | ou listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for this page.  |
| Name and Address   | On which entry in Part 1 or Part2 did you list the original creditor?   |
| AMEX   | Line 4.1 of (Check one):  |
| Attn: Bankruptcy Department<br>PO Box 297871               | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
| Fort Lauderdale, FL 33329                                  | Last 4 digits of account number   |
|  |   |
| Name and Address<br>Capital 1 Bank                         | On which entry in Part 1 or Part2 did you list the original creditor?   |
| Attn: General Correspondence<br>Po Box 30285               | Line 4.3 of (Check one):  ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims  |
| Salt Lake City, UT 84130                                   | Look 4 digits of appoint number   |
|  | Last 4 digits of account number   |
| Name and Address   | On which entry in Part 1 or Part2 did you list the original creditor?   |
| Capital One Bank Usa N<br> 5000 Capital One Dr             | Line <u>4.3</u> of ( <i>Check one</i> ): □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims   |
| Richmond, VA 23238   |   |
|  | Last 4 digits of account number   |
| Name and Address<br>Capital One, N.A.                      | On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.3 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  |
| PO Box 71083<br>Charlotte, NC 28272-1083                   | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
| ,  | Last 4 digits of account number   |
| Name and Address   | On which entry in Part 1 or Part2 did you list the original creditor?   |
| Citi<br>PO Box 6500  | Line 4.4 of (Check one):  |
| Sioux Falls, SD 57117-6500                                 | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
|  | Last 4 digits of account number   |
| Name and Address   | On which entry in Part 1 or Part2 did you list the original creditor?   |
| Citibank NA  | Line 4.4 of (Check one):  |
| PO Box 769006<br>San Antonio, TX 78245                     | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
| ,  | Last 4 digits of account number   |
| Name and Address   | On which entry in Part 1 or Part2 did you list the original creditor?   |
| Gemb/SAMDC   | Line <u>4.6</u> of ( <i>Check one</i> ):  |

Debtor 1 Axel E. Denk

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Case number (if know)

| Bankruptcy Dept.<br>PO Box 103104<br>Roswell, GA 30076                                   |  | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |  |
|--|--|---|--|--|--|
|  | Last 4 digits of account nur   | mber  |  |  |  |
| Name and Address<br>Gemb/SAMDC<br>Bankruptcy Dept.<br>PO Box 103104<br>Roswell, GA 30076 | On which entry in Part 1 or Line 4.7 of (Check one):  Last 4 digits of account nur | Part2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims  mber |  |  |  |
| Name and Address US Bank Attn: Bankruptcy Dept PO Box 5229 Cincinnati, OH 45201-5229     | On which entry in Part 1 or Line 4.9 of (Check one):  Last 4 digits of account nur | Part2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims       |  |  |  |
|  |  |   |  |  |  |
| Name and Address US Bank 1200 Energy Park Drive Saint Paul, MN 55108                     | On which entry in Part 1 or Line <u>4.9</u> of ( <i>Check one</i> ):               | Part2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims      |  |  |  |
|  | Last 4 digits of account number  |   |  |  |  |
| Name and Address US Bank Attn: Bankruptcy Dept PO Box 5229 Cincinnati, OH 45201-5229     | On which entry in Part 1 or Line 4.10 of (Check one):                              | Part2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims      |  |  |  |
|  | Last 4 digits of account nur   | Last 4 digits of account number   |  |  |  |
| Name and Address<br>US Bank<br>1200 Energy Park Drive<br>Saint Paul, MN 55108            | On which entry in Part 1 or Line 4.10 of (Check one):                              | Part2 did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims      |  |  |  |
|  | Last 4 digits of account number  |   |  |  |  |

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1 Axel E. Denk

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total claim |           |
|--------------|-----|---|-----|-------------|-----------|
|              | 6a. | Domestic support obligations  | 6a. | \$          | 0.00      |
| Total claims |     |   |     |             |           |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$          | 0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$          | 0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$          | 0.00      |
|              |     |   |     |             |           |
|              | 6e. | Total. Add lines 6a through 6d.   | 6e. | \$          | 0.00      |
|              |     |   |     | Total Claim |           |
|              | 6f. | Student loans   | 6f. | \$          | 0.00      |
| Total claims |     |   |     |             |           |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$          | 0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$          | 0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$          | 26,104.00 |
|              | 6j. | Total. Add lines 6f through 6i.   | 6j. | \$          | 26,104.00 |

Page 24 of 50 Document Fill in this information to identify your case: Debtor 1 Axel E. Denk Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Irma Quijano<br>6434 N Richmond St<br>Apt. 1<br>Chicago, IL 60645  | Month to Month                          |

| C                                    | ase 10-04034  | Doc 1 Filed 02/1  Docume  |                             | 50   | 2/15/16 12:49F   |
|--------------------------------------|---|---|-----------------------------|--|--|
| Fill in this info                    | rmation to identify you                                     |   | 1 440 20 01                 |  |  |
| Debtor 1                             | Axel E. Denk  |   |                             |  |  |
| Debtor 2                             | First Name  | Middle Name   | Last Name                   |  |  |
| (Spouse if, filing)                  | First Name  | Middle Name   | Last Name                   |  |  |
| United States E                      | Sankruptcy Court for the:                                   | NORTHERN DISTRICT   | OF ILLINOIS                 |  |  |
| Case number (if known)               |   |   |                             |  | ☐ Check if this is an amended filing   |
| Official Fo                          | orm 106H  |   |                             |  |  |
| Schedule                             | H: Your Cod   | lebtors   |                             |  | 12/15  |
| 1. Do you l □ No ■ Yes 2. Within the | have any codebtors? (If                                     | n). Answer every question.  f you are filing a joint case, of the property of | do not list either spouse a | <b>?</b> (Community property st  | ates and territories include   |
| ■ No. Go t □ Yes. Did                |   | ouse, or legal equivalent live  | with you at the time?       |  |  |
| in line 2 ag                         | gain as a codebtor only<br>)), Schedule E/F (Officia        | if that person is a guaran  | or or cosigner. Make s      | ure you have listed the o  | rith you. List the person show<br>creditor on Schedule D (Offici<br>hedule E/F, or Schedule G to |
|                                      | mn 1: Your codebtor<br>Number, Street, City, State and 2    | ZIP Code  |                             | Column 2: The creditor Check all schedules the                         | or to whom you owe the debt at apply:  |
| 1820<br>Apt.                         | vanni Santana-Denk<br>) N Spaulding<br>301<br>ago, IL 60647 |   |                             | ■ Schedule D, line □ Schedule E/F, line □ Schedule G American Honda Fi | e  |

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Fill in this information to identify your case: Debtor 1 Axel E. Denk Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Check if this is: Case number (If known) ■ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: Official Form 106I MM / DD/ YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. □ Employed □ Employed If you have more than one job, **Employment status** attach a separate page with Not employed Not employed information about additional employers. Occupation Retired non-filing spouse Include part-time, seasonal, or **Employer's name** self-employed work. **Employer's address** Occupation may include student or homemaker, if it applies. How long employed there? **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 0.00 2. \$ 0.00 \$

| 2. | <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. |
|----|--|
| 3. | Estimate and list monthly overtime pay.  |
| 4. | Calculate gross Income. Add line 2 + line 3.   |

| 3. | +\$ | 0.00 | +\$ | 0.00 |
|----|-----|------|-----|------|
| 4. | \$  | 0.00 | \$  | 0.00 |

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| Debt | tor 1               | Axel E. Denk  |            | Case n     | umber (if known)                        |                    |                                |           |
|------|---------------------|---|------------|------------|---|--------------------|--------------------------------|-----------|
|      | Cor                 | by line 4 here  | 4.         | For E      | Debtor 1 0.00                           |                    | otor 2 or<br>ng spouse<br>0.00 |           |
| _    |                     | -   |            | · —        | 0.00                                    | ·                  | 0.00                           |           |
| 5.   |                     | all payroll deductions:   |            | Φ.         |   | •                  | 0.00                           |           |
|      | 5a.<br>5b.          | Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans   | 5a.<br>5b. | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 5c.                 | Voluntary contributions for retirement plans  | 5c.        | \$—        | 0.00                                    | \$                 | 0.00                           |           |
|      | 5d.                 | Required repayments of retirement fund loans  | 5d.        | \$<br>     | 0.00                                    | \$                 | 0.00                           |           |
|      | 5e.                 | Insurance   | 5e.        | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 5f.                 | Domestic support obligations  | 5f.        | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 5g.                 | Union dues  | 5g.        | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 5h.                 | Other deductions. Specify:  | _ 5h.+     | \$         | 0.00                                    | + \$               | 0.00                           |           |
| 6.   | Add                 | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.         | \$         | 0.00                                    | \$                 | 0.00                           |           |
| 7.   | Cal                 | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$         | 0.00                                    | \$                 | 0.00                           |           |
| 8.   | List<br>8a.         | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total               |            |            |   |                    |                                |           |
|      |                     | monthly net income.   | 8a.        | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 8b.                 | Interest and dividends  | 8b.        | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 8c.<br>8d.          | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation   | 8c.<br>8d. | \$<br>     | 0.00                                    | \$<br>             | 0.00                           |           |
|      | 8e.                 | Social Security   | 8e.        | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 8f.                 | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:   | _ 8f.      | \$         | 0.00                                    | \$                 | 0.00                           |           |
|      | 8g.                 | Pension or retirement income  | 8g.        | \$<br>· \$ | 2,929.00                                | \$                 | 1,347.00                       |           |
|      | 8h.                 | Other monthly income. Specify:  | _ 8h.+     |            | 0.00                                    | · \$               | 0.00                           | _         |
| 9.   | Add                 | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$         | 2,929.00                                | \$                 | 1,347.00                       |           |
| 10.  | Cal                 | culate monthly income. Add line 7 + line 9.   | 10. \$     | 2          | ,929.00 + \$                            | 1,347.             | 00 = \$                        | 4,276.00  |
|      |                     | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | '          |            | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | .,                 | <del></del>                    | 1,21 0100 |
| 11.  | Incli<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify: | deper      | ,          | •                                       | ed in <i>Sch</i> e | edule J.<br>11. +\$            | 0.00      |
| 12.  |                     | I the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certailies   |            |            |   | a, if it           | 12. \$ Combin                  | 4,276.00  |
|      |                     |   |            |            |   |                    |                                | / income  |
| 13.  | Do :                | you expect an increase or decrease within the year after you file this form<br>No.  | ?          |            |   |                    | •                              |           |
|      | _                   | Yes. Explain:   |            |            |   |                    |                                |           |

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| Fill       | in this information to identify your case:   |  |                           |   |   |
|------------|--|--|---------------------------|---|---|
| Deb        | otor 1 Axel E. Denk  |  | Che                       | ck if this is:                            |   |
|            |  |  |                           | An amended filing                         |   |
|            | ouse, if filing)   |  |                           | A supplement shown 13 expenses as of      | wing postpetition chapter the following date: |
|            | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING   | DIS  |                           | MM / DD / YYYY                            |   |
|            |  |  |                           |   |   |
| l          | nown)  |  |                           |   |   |
| $\cap$     | fficial Form 106J  |  |                           |   |   |
|            | chedule J: Your Expenses   |  |                           |   | 12/15   |
| Be<br>info | as complete and accurate as possible. If two married people are promation. If more space is needed, attach another sheet to this famber (if known). Answer every question.                               | e filing together, be<br>form. On the top of | oth are eq<br>f any addit | ually responsible f<br>ional pages, write | or supplying correct<br>your name and case    |
|            | t 1: Describe Your Household   |  |                           |   |   |
| 1.         | Is this a joint case?  |  |                           |   |   |
|            | <ul><li>No. Go to line 2.</li><li>☐ Yes. Does Debtor 2 live in a separate household?</li></ul>   |  |                           |   |   |
|            | ☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>  | for Separate House                           | ehold of De               | btor 2.                                   |   |
| 2.         | Do you have dependents? ■ No   |  |                           |   |   |
|            | Do not list Debtor 1   | Dependent's relation Debtor 1 or Debtor      |                           | Dependent's age                           | Does dependent live with you?                 |
|            | Do not state the   |  |                           |   | □ No  |
|            | dependents names.  |  |                           |   | ☐ Yes   |
|            |  |  |                           |   | □ No  |
|            |  |  |                           |   | ☐ Yes   |
|            |  |  |                           |   | □ No  |
|            |  |  |                           |   | ☐ Yes<br>☐ No                                 |
|            |  |  |                           |   | ☐ Yes   |
| 3.         | Do your expenses include ■ No  |  |                           |   | <b>1</b> 103                                  |
|            | expenses of people other than yourself and your dependents?  |  |                           |   |   |
|            | yourself and your dependents.  |  |                           |   |   |
| Est<br>exp | t 2: Estimate Your Ongoing Monthly Expenses<br>cimate your expenses as of your bankruptcy filing date unless your<br>consess as of a date after the bankruptcy is filed. If this is a suppolicable date. |  |                           |   |   |
| the        | lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Y   |  |                           | Your exp                                  | enses   |
| (UI        | ficial Form 106I.)   |  |                           |   |   |
| 4.         | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.  | nclude first mortgage                        | e<br>4. S                 | \$  | 750.00  |
|            | If not included in line 4:   |  |                           |   |   |
|            | 4a. Real estate taxes  |  | 4a. \$                    | \$  | 0.00  |
|            | 4b. Property, homeowner's, or renter's insurance   |  | 4b.                       |   | 20.00   |
|            | 4c. Home maintenance, repair, and upkeep expenses  |  | 4c. \$                    |   | 100.00  |
| 5.         | <ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as hor</li> </ul>  | ne equity loans                              | 4d. \$<br>5. \$           |   | 0.00  |
| o.         | inortgago paymonto for your residence, such as not   | no oquity idanis                             | J. (                      | ۲   | 0.00  |

| Debtor 1 |            | Axel E. Denk   | Case num     | ber (if known)                        |                          |
|----------|------------|--|--------------|---------------------------------------|--------------------------|
| 0        |            |  |              |                                       |                          |
| 6.       | Utiliti    | les: Electricity, heat, natural gas  | 60           | ¢                                     | 400.00                   |
|          | 6a.<br>6b. |  | 6a.<br>6b.   | ·                                     | 190.00                   |
|          | 6c.        | Water, sewer, garbage collection  Telephone, cell phone, Internet, satellite, and cable services | 6c.          | ·                                     | 0.00                     |
|          | 6d.        | Other. Specify:  | 6d.          | · · · · · · · · · · · · · · · · · · · | 310.00                   |
| 7        |            |  |              | ·                                     | 0.00                     |
| 7.<br>8. |            | and housekeeping supplies<br>lcare and children's education costs                                | 7.<br>8.     | ·                                     | 588.00                   |
|          |            |  | 9.           | ·                                     | 0.00                     |
| 9.<br>10 |            | ning, laundry, and dry cleaning  | 9.<br>10.    | · ·                                   | 150.00                   |
|          |            | onal care products and services  |              | ·                                     | 100.00                   |
| 11.      |            | cal and dental expenses  | 11.          | \$                                    | 150.00                   |
| 12.      |            | sportation. Include gas, maintenance, bus or train fare.  ot include car payments.               | 12.          | \$                                    | 500.00                   |
| 13.      |            | rtainment, clubs, recreation, newspapers, magazines, and books                                   | 13.          | ·                                     | 150.00                   |
|          |            | itable contributions and religious donations   | 14.          |                                       | 150.00                   |
|          | Insur      | <u> </u>   | 17.          | Ψ                                     | 130.00                   |
| 10.      |            | of include insurance deducted from your pay or included in lines 4 or 20.                        |              |                                       |                          |
|          |            | Life insurance   | 15a.         | \$                                    | 91.00                    |
|          | 15b.       | Health insurance   | 15b.         | \$                                    | 0.00                     |
|          | 15c.       | Vehicle insurance  | 15c.         | \$                                    | 85.00                    |
|          | 15d.       | Other insurance. Specify:  | 15d.         | \$                                    | 0.00                     |
| 16.      |            | s. Do not include taxes deducted from your pay or included in lines 4 or 20.                     |              |                                       |                          |
|          | Speci      |  | 16.          | \$                                    | 0.00                     |
| 17.      | Instal     | Ilment or lease payments:  |              |                                       |                          |
|          | 17a.       | Car payments for Vehicle 1   | 17a.         | \$                                    | 0.00                     |
|          | 17b.       | Car payments for Vehicle 2   | 17b.         | \$                                    | 0.00                     |
|          | 17c.       | Other. Specify:  | 17c.         | \$                                    | 0.00                     |
|          | 17d.       | Other. Specify:  | 17d.         | \$                                    | 0.00                     |
| 18.      |            | payments of alimony, maintenance, and support that you did not report as                         |              |                                       | 0.00                     |
|          |            | cted from your pay on line 5, Schedule I, Your Income (Official Form 106l).                      | 18.          | ·                                     | 0.00                     |
| 19.      |            | r payments you make to support others who do not live with you.                                  |              | \$                                    | 0.00                     |
| 00       | Speci      |  | 19.          |                                       |                          |
| 20.      |            | r real property expenses not included in lines 4 or 5 of this form or on Sche                    | 20a.         |                                       | 0.00                     |
|          |            | Mortgages on other property Real estate taxes  | 20a.<br>20b. |                                       | 0.00<br>0.00             |
|          |            |  | 20b.<br>20c. | ·                                     | 0.00                     |
|          |            | Property, homeowner's, or renter's insurance   | 20d.         | ·                                     |                          |
|          |            | Maintenance, repair, and upkeep expenses   |              | ·                                     | 0.00                     |
| 04       |            | Homeowner's association or condominium dues  | 20e.         | · <u> </u>                            | 0.00                     |
| 21.      |            | r: Specify: Auto Maintenance   |              | +\$                                   | 200.00                   |
|          |            | 's Credit Card Payment   |              | +\$                                   | 400.00                   |
|          |            | 's Life Ins.   |              | +\$                                   | 69.00                    |
|          |            | 's Health Ins.   |              | +\$                                   | 221.00                   |
|          | Wite       | 's Prescript Ins./Coverage   |              | +\$                                   | 52.00                    |
| 22.      | Calcu      | ulate your monthly expenses  |              |                                       |                          |
|          |            | Add lines 4 through 21.  |              | \$                                    | 4,276.00                 |
|          | 22b. (     | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2                  |              | \$                                    | ,                        |
|          |            | Add line 22a and 22b. The result is your monthly expenses.                                       |              | \$                                    | 4,276.00                 |
|          | 220.7      | The result by your monthly expenses.   |              | Ψ                                     | 4,270.00                 |
| 23.      |            | ulate your monthly net income.   |              |                                       |                          |
|          |            | Copy line 12 (your combined monthly income) from Schedule I.                                     | 23a.         |                                       | 4,276.00                 |
|          | 23b.       | Copy your monthly expenses from line 22c above.  | 23b.         | -\$                                   | 4,276.00                 |
|          |            |  |              |                                       |                          |
|          | 23c.       | Subtract your monthly expenses from your monthly income.   | 23c.         | \$                                    | 0.00                     |
|          |            | The result is your monthly net income.   | 200.         |                                       | 0.00                     |
| 24       | Do vo      | ou expect an increase or decrease in your expenses within the year after yo                      | u file this  | s form?                               |                          |
| ۲٠.      |            | ample, do you expect to finish paying for your car loan within the year or do you expect your m  |              |                                       | or decrease because of a |
|          | modifie    | cation to the terms of your mortgage?  |              |                                       |                          |
|          | ■ No       | D.   |              |                                       |                          |

| ■ No.  |               |
|--------|---------------|
| ☐ Yes. | Explain here: |

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| Debtor 1   | Axel E. Denk  |                          |                              |                 |                                    |  |  |
|--|---|--------------------------|------------------------------|-----------------|------------------------------------|--|--|
|  | First Name  | Middle Name              | Last Name                    |                 |                                    |  |  |
| Debtor 2   |   |                          |                              |                 |                                    |  |  |
| (Spouse if, filing)  | First Name  | Middle Name              | Last Name                    |                 |                                    |  |  |
| United States Ban  | kruptcy Court for the:  | NORTHERN DISTRIC         | T OF ILLINOIS                |                 |                                    |  |  |
| Case number  |   |                          |                              |                 |                                    |  |  |
| (if known)   |   |                          |                              |                 | Check if this is an amended filing |  |  |
| Official Form  Declarati   |   | n Individua              | l Debtor's Sch               | edules          | 12/15                              |  |  |
| If two married peo   | ople are filing togethe   | r, both are equally resp | onsible for supplying correc | et information. |                                    |  |  |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |   |                          |                              |                 |                                    |  |  |
| Sign   | Below   |                          |                              |                 |                                    |  |  |
| Did you pay  | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |                          |                              |                 |                                    |  |  |

■ No

| Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration |
|---------------------|---|
|                     | and Signature (Official Form 119).                          |
|                     |   |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

| x / | s/ Axel E. Denk                    | X |                       |
|-----|------------------------------------|---|-----------------------|
|     | Axel E. Denk Signature of Debtor 1 |   | Signature of Debtor 2 |
| [   | Date February 15, 2016             |   | Date                  |

Official Form 106Dec

Fill in this information to identify your case:

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| Fill  | in this                  | information to identify you           | ır case:                      |   |                             |                            |
|-------|--------------------------|---------------------------------------|-------------------------------|---|-----------------------------|----------------------------|
| Deb   | otor 1                   | Axel E. Denk                          |                               |   |                             |                            |
| D - 1 | 0                        | First Name                            | Middle Name                   | Last Name   |                             |                            |
|       | otor 2<br>ouse if, filin | g) First Name                         | Middle Name                   | Last Name   |                             |                            |
| Uni   | ted Stat                 | es Bankruptcy Court for the:          | NORTHERN DISTRIC              | T OF ILLINOIS   |                             |                            |
| Cas   | se numb                  | per                                   |                               |   |                             |                            |
|       | nown)                    |                                       |                               |   | Ι [                         | Check if this is an        |
|       |                          |                                       |                               |   |                             | amended filing             |
|       | <i>.</i>                 | - 40-                                 |                               |   |                             |                            |
|       |                          | Form 107                              |                               |   | _                           |                            |
| Sta   | atem                     | ent of Financial                      | Affairs for Indiv             | iduals Filing for E   | Bankruptcy                  | 12/1                       |
|       |                          |                                       |                               | le are filing together, both a<br>to this form. On the top of a |                             |                            |
|       |                          | known). Answer every que              |                               | to this form. On the top of a                                   | ny additional pages, writ   | e your name and case       |
| Par   | t 1:                     | Give Details About Your Ma            | arital Status and Where \     | ou Lived Before   |                             |                            |
| 4     |                          |                                       |                               |   |                             |                            |
| 1.    | wnati                    | s your current marital state          | us?                           |   |                             |                            |
|       | M                        | arried                                |                               |   |                             |                            |
|       |                          | ot married                            |                               |   |                             |                            |
| 2.    | During                   | the last 3 years, have you            | lived anywhere other that     | an where you live now?  |                             |                            |
|       | ■ No                     | 0                                     |                               |   |                             |                            |
|       | _                        |                                       | lived in the last 3 years. Do | o not include where you live no                                 | w.                          |                            |
|       | Debto                    | or 1 Prior Address:                   | Dates Debtor                  | 1 Debtor 2 Prior A  | ddress:                     | Dates Debtor 2             |
|       | Debto                    | i i i i i i i i i i i i i i i i i i i | lived there                   | DODIOI Z I HOI A  | udi 655.                    | lived there                |
| 3.    | Within                   | the last 8 years, did you e           | ver live with a spouse or     | legal equivalent in a commu                                     | inity property state or ter | ritory? (Community propert |
| state | es and to                | erritories include Arizona, Ca        | alifornia, Idaho, Louisiana,  | Nevada, New Mexico, Puerto                                      | Rico, Texas, Washington a   | and Wisconsin.)            |
|       | ■ No                     | 0                                     |                               |   |                             |                            |
|       | □ Ye                     | es. Make sure you fill out Sc         | hedule H: Your Codebtors      | (Official Form 106H).   |                             |                            |
| Par   | t 2                      | Explain the Sources of You            | ır İncome                     |   |                             |                            |
|       |                          | zapiam mo oduroso er rec              |                               |   |                             |                            |
| 4.    |                          |                                       |                               | iting a business during this<br>nd all businesses, including pa |                             | calendar years?            |
|       |                          |                                       |                               | eive together, list it only once                                |                             |                            |
|       | ■ No                     | 0                                     |                               |   |                             |                            |
|       | _                        | es. Fill in the details.              |                               |   |                             |                            |
|       |                          |                                       | Debtor 1                      |   | Debtor 2                    |                            |
|       |                          |                                       | Sources of income             | Gross income  | Sources of income           | Gross income               |
|       |                          |                                       | Chock all that apply          | (hefere deductions and  | Check all that apply        | (hefere deductions         |

exclusions)

and exclusions)

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Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) From January 1 of current year until Pension \$2,929.00 the date you filed for bankruptcy: For last calendar year: \$35,148.00 Pension (January 1 to December 31, 2015) For the calendar year before that: Pension \$27,337.00 (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

NoYes. List all payments to an insider

Insider's Name and Address

Dates of payment

Total amount
paid

Amount you
still owe

Debtor 1

Axel E. Denk

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| 8.  | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited are insider?  Include payments on debts guaranteed or cosigned by an insider. |                             |                       |                      |                         |                              |  |
|-----|---|-----------------------------|-----------------------|----------------------|-------------------------|------------------------------|--|
|     | Yes. List all payments to an insider  |                             |                       |                      |                         |                              |  |
|     | Insider's Name and Address  | Dates of payment            | Total amount paid     | Amount you still owe | Reason for Include cred | this payment<br>litor's name |  |
| Par | t 4: Identify Legal Actions, Repossession   | ons, and Foreclosures       |                       |                      |                         |                              |  |
| 9.  | Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.  |                             |                       |                      |                         |                              |  |
|     | <ul><li>No</li><li>Yes. Fill in the details.</li></ul>  |                             |                       |                      |                         |                              |  |
|     | Case title Case number  | Nature of the case          | Court or agency       |                      | Status of th            | e case                       |  |
| 10. | Within 1 year before you filed for bankrup Check all that apply and fill in the details belo  No  |                             | erty repossessed, f   | oreclosed, garnis    | shed, attache           | d, seized, or levied?        |  |
|     | ☐ Yes. Fill in the information below.   |                             |                       |                      |                         |                              |  |
|     | Creditor Name and Address   | Describe the Property       | Describe the Property |                      |                         | Value of the                 |  |
|     |   | Explain what happened       | d                     |                      |                         | property                     |  |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment be  ■ No □ Yes. Fill in the details.  |                             | luding a bank or fii  | nancial institution  | n, set off any          | amounts from your            |  |
|     | Creditor Name and Address   | Describe the action the     | creditor took         | Date taken           | action was              | Amount                       |  |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or  |                             | erty in the possess   | ion of an assigne    | e for the ben           | efit of creditors, a         |  |
|     | ■ No □ Yes  |                             |                       |                      |                         |                              |  |
| Par | t 5: List Certain Gifts and Contributions   | 3                           |                       |                      |                         |                              |  |
| 13. | Within 2 years before you filed for bankru  ■ No  | ptcy, did you give any gift | s with a total value  | of more than \$60    | 00 per person           | ?                            |  |
|     | Yes. Fill in the details for each gift.   |                             |                       |                      |                         |                              |  |
|     | Gifts with a total value of more than \$600 per person  | Describe the gifts          |                       | Dates<br>the g       | s you gave<br>ifts      | Value                        |  |
|     | Person to Whom You Gave the Gift and Address:   |                             |                       |                      |                         |                              |  |
| 14. | Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co   |                             | s or contributions    | with a total value   | of more than            | \$600 to any charity         |  |
|     | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)   | Describe what you           | ı contributed         | Dates<br>contr       | s you<br>ibuted         | Value                        |  |
| Par | t 6: List Certain Losses  |                             |                       |                      |                         |                              |  |

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other

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|     | disaster, or gambling?   |                        |  |                 |                                   |                        |  |
|-----|--|------------------------|--|-----------------|-----------------------------------|------------------------|--|
|     | ■ No   |                        |  |                 |                                   |                        |  |
|     | ☐ Yes. Fill in the details.  |                        |  |                 |                                   |                        |  |
|     | Describe the property you lost and   | Descri                 | be any insurance coverage for the lo   | ss              | Date of your                      | Value of property      |  |
|     | how the loss occurred  |                        | the amount that insurance has paid. Light insurance claims on line 33 of Scheduty. |                 | loss                              | lost                   |  |
| Par | t 7: List Certain Payments or Transfers  |                        | ,  |                 |                                   |                        |  |
|     |  |                        |  |                 |                                   |                        |  |
| 16. | Within 1 year before you filed for bankru<br>consulted about seeking bankruptcy or<br>Include any attorneys, bankruptcy petition   | preparir               | ng a bankruptcy petition?  |                 |                                   | rty to anyone you      |  |
|     | □ No   |                        |  |                 |                                   |                        |  |
|     | Yes. Fill in the details.  |                        |  |                 |                                   |                        |  |
|     | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You   |                        | Description and value of any property transferred                                  |                 | Date payment or transfer was made | Amount of payment      |  |
|     | David M. Siegel & Associates<br>790 Chaddick Drive<br>Wheeling, IL 60090<br>Wheeling, IL 60090   |                        | Attorney Fees  |                 | 12/8/15-2/16/1<br>6               | \$1,215.00             |  |
| 17. | Within 1 year before you filed for bankrupromised to help you deal with your cre Do not include any payment or transfer tha  No Yes. Fill in the details.  | ditors o               | r to make payments to your creditors   |                 | or transfer any prope             | rty to anyone who      |  |
|     | Person Who Was Paid<br>Address   |                        | Description and value of any prope transferred                                     | erty            | Date payment or transfer was      | Amount of payment      |  |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details. |                        |  |                 |                                   |                        |  |
|     | Person Who Received Transfer<br>Address  |                        | Description and value of property transferred                                      |                 | any property or received or debts | Date transfer was made |  |
|     | Person's relationship to you   |                        |  | paid iii ext    | Silaliye                          |                        |  |
| 19. | Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details.  | kruptcy,<br>t-protecti | did you transfer any property to a seion devices.)                                 | elf-settled tru | ust or similar device             | of which you are a     |  |
|     | Name of trust  |                        | Description and value of the prope   | rty transferr   | ed                                | Date Transfer was made |  |

Debtor 1 Axel E. Denk

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| Part 8: | List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units |  |  |
|---------|--|--|--|

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred Last balance before closing or transfer

2/15/16 12:49PM

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents

Do you still have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy

No

Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

to it?
Address (Number, Street, City,
State and ZIP Code)

Describe the contents

Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it

Date of notice

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| 25.      | Have you notified any governmental unit o  | f any release of hazardous material?  |  |                        |  |  |  |  |  |
|----------|--|---|--|------------------------|--|--|--|--|--|
|          | ■ No   |   |  |                        |  |  |  |  |  |
|          | ■ No □ Yes. Fill in the details.   |   |  |                        |  |  |  |  |  |
|          | Name of site   | Governmental unit   | Environmental law, if you                      | Date of notice         |  |  |  |  |  |
|          | Address (Number, Street, City, State and ZIP Code)   | Address (Number, Street, City, State and ZIP Code)                            |  | Date of Hoties         |  |  |  |  |  |
| 26.      | Have you been a party in any judicial or ad  | ministrative proceeding under any envi  | ronmental law? Include settlements             | and orders.            |  |  |  |  |  |
|          | -  |   |  |                        |  |  |  |  |  |
|          | ■ No □ Yes. Fill in the details.   |   |  |                        |  |  |  |  |  |
|          | Case Title   | Court or agency   | Nature of the case                             | Status of the          |  |  |  |  |  |
|          | Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)       | Nature of the case                             | case                   |  |  |  |  |  |
| Pai      | t 11: Give Details About Your Business or  | Connections to Any Business   |  |                        |  |  |  |  |  |
| 27       | Within 4 years before you filed for bankrup  | stev did vou own a business or have an  | ov of the following connections to a           | ny husiness?           |  |  |  |  |  |
| 21.      |  |   | -  | ly business:           |  |  |  |  |  |
|          | _  | in a trade, profession, or other activity,                                    | -  |                        |  |  |  |  |  |
|          |  | pany (LLC) or limited liability partnersh                                     | ip (LLP)                                       |                        |  |  |  |  |  |
|          | ☐ A partner in a partnership   |   |  |                        |  |  |  |  |  |
|          | ☐ An officer, director, or managing ex   | xecutive of a corporation   |  |                        |  |  |  |  |  |
|          | ☐ An owner of at least 5% of the voti  | ☐ An owner of at least 5% of the voting or equity securities of a corporation |  |                        |  |  |  |  |  |
|          | ■ No. None of the above applies. Go to Part 12.  |   |  |                        |  |  |  |  |  |
|          | Yes. Check all that apply above and fill in the details below for each business.                   |   |  |                        |  |  |  |  |  |
|          | Business Name  Describe the nature of the business  Employer Identification number                 |   |  |                        |  |  |  |  |  |
|          | Address  |   | Do not include Social Security number or ITIN. |                        |  |  |  |  |  |
|          | (Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper  | Dates business existed                         |                        |  |  |  |  |  |
| 28.      | Within 2 years before you filed for bankrup  | otcv. did vou give a financial statement                                      | to anvone about vour business? Inc             | lude all financial     |  |  |  |  |  |
|          | institutions, creditors, or other parties.   | <i>3.</i> 3 6   |  |                        |  |  |  |  |  |
|          | ■ No   |   |  |                        |  |  |  |  |  |
|          | Yes. Fill in the details below.  |   |  |                        |  |  |  |  |  |
|          | Name   | Date Issued   |  |                        |  |  |  |  |  |
|          | Address (Number, Street, City, State and ZIP Code)   |   |  |                        |  |  |  |  |  |
| Pa       |  |   |  |                        |  |  |  |  |  |
| Га       | rt 12: Sign Below  |   |  |                        |  |  |  |  |  |
|          | ve read the answers on this <i>Statement of Fi</i><br>true and correct. I understand that making a |   |  |                        |  |  |  |  |  |
| with     | a bankruptcy case can result in fines up to  |   |  | rada iii ooriiicotioii |  |  |  |  |  |
| 18 L     | J.S.C. §§ 152, 1341, 1519, and 3571.   |   |  |                        |  |  |  |  |  |
| /s/      | Axel E. Denk   | _   |  |                        |  |  |  |  |  |
|          | el E. Denk   | Signature of Debtor 2   |  |                        |  |  |  |  |  |
| Sig      | nature of Debtor 1   |   |  |                        |  |  |  |  |  |
| Da       | February 15, 2016  | Date  |  |                        |  |  |  |  |  |
| Did      | you attach additional pages to Your Statem   | ent of Financial Affairs for Individuals I                                    | Filing for Bankruptcy (Official Form           | 107)?                  |  |  |  |  |  |
| <b>I</b> |  |   |  |                        |  |  |  |  |  |
|          | es es  |   |  |                        |  |  |  |  |  |
| Did      | you pay or agree to pay someone who is no  | ot an attorney to help you fill out bankru                                    | iptcy forms?                                   |                        |  |  |  |  |  |
|          |  |   |  |                        |  |  |  |  |  |
|          | es. Name of Person Attach the Bankr  |   |  |                        |  |  |  |  |  |
| Offic    | ial Form 107 Stater  | ment of Financial Affairs for Individuals Filing                              | for Bankruptcy                                 | page (                 |  |  |  |  |  |

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Document

Page 37 of 50 Case number (if known) Debtor 1 Axel E. Denk

| ase 16-04634 | DOC T | Filea 02/15/16 | Entered 02/15/16 13:08:58 | Desc Mail |
|--------------|-------|----------------|---------------------------|-----------|
|              |       | Document       | Page 38 of 50             |           |

|                                      |   |                     |  | •                                    |
|--------------------------------------|---|---------------------|--|--------------------------------------|
| Fill in this inforr                  | mation to identify your o                           | ase:                |  |                                      |
| Debtor 1                             | Axel E. Denk  | Middle Nove         | Lankhama   |                                      |
| Debtor 2                             | First Name  | Middle Name         | Last Name  |                                      |
| (Spouse if, filing)                  | First Name  | Middle Name         | Last Name  |                                      |
| United States Ba                     | nkruptcy Court for the:                             | NORTHERN DIST       | FRICT OF ILLINOIS  |                                      |
| Case number                          |   |                     |  |                                      |
| (if known)                           |   |                     |  | ☐ Check if this is an                |
|                                      |   |                     |  | amended filing                       |
|                                      |   |                     |  |                                      |
| Official Fo                          | rm 108  |                     |  |                                      |
| Statemer                             | nt of Intention                                     | n for Indiv         | iduals Filing Under Chapt  | er 7                                 |
|                                      |   |                     |  |                                      |
|                                      | vidual filing under chap                            | -                   | Il out this form if:   |                                      |
|                                      | e claims secured by you                             |                     | at assistant   |                                      |
|                                      | ed personal property ar<br>s form with the court wi |                     | ot expired.  you file your bankruptcy petition or by the date s  | set for the meeting of creditors,    |
|                                      | ver is earlier, unless the                          |                     | e time for cause. You must also send copies to t   |                                      |
|                                      |   |                     |  |                                      |
|                                      | eople are filing together<br>ad date the form.      | in a joint case, bo | oth are equally responsible for supplying correct  | information. Both debtors must       |
| Ro as complete a                     | and accurate as nessibl                             | a If more space is  | s needed, attach a separate sheet to this form. O  | n the ten of any additional nages    |
| write yo                             | our name and case num                               | ber (if known).     | s needed, attach a separate sheet to this form. Of   | in the top of any additional pages,  |
| Part 1: List Yo                      | our Creditors Who Have                              | Secured Claims      |  |                                      |
| •                                    |   |                     |  |                                      |
| 1. For any credite<br>information be |   | rt 1 of Schedule D  | Creditors Who Have Claims Secured by Proper  | ty (Official Form 106D), fill in the |
|                                      | editor and the property th                          | at is collateral    | What do you intend to do with the property tha   |                                      |
|                                      |   |                     | secures a debt?  | as exempt on Schedule C?             |
|                                      |   |                     |  |                                      |
|                                      | merican Honda Finar                                 | ıce                 | ☐ Surrender the property.  | □ No                                 |
| name:                                |   |                     | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>  | ■ Yes                                |
| Description of                       | 2014 Honda Civic S                                  | 3I                  | Reaffirmation Agreement.   |                                      |
| property                             | Honda Corporation                                   |                     | ☐ Retain the property and [explain]:   |                                      |
| securing debt:                       | Secured Lien \$26,7                                 | 23.00               |  |                                      |
|                                      | Co-signer has auto                                  | and makes           |  |                                      |
|                                      | the payments  |                     |  | <u> </u>                             |
| Part 2: List Yo                      | our Unexpired Personal                              | Property Leases     |  |                                      |
| For any unexpire                     | ed personal property lea                            | se that you listed  | in Schedule G: Executory Contracts and Unexpired leaves that are still in affect to                    |                                      |
|                                      |   |                     | nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p |                                      |
| Describe verm                        |   | outy looped         |  | Will the lease he assumed?           |
| Describe your u                      | nexpired personal prop                              | erty leases         |  | Will the lease be assumed?           |
| Lessor's name:                       | Irma Quijano  |                     |  | □ No                                 |
|                                      |   |                     |  | ■ V                                  |
|                                      |   |                     |  | ■ Yes                                |
| Description of lea<br>Property:      | ased Month to Month                                 | n                   |  |                                      |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

2/15/16 12:49PM

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| Pai | t 3: Si | gn Below  |   |
|-----|---------|---|---|
|     |         | ty of perjury, I declare that I have indicated it is subject to an unexpired lease. | d my intention about any property of my estate that secures a debt and any personal |
| Χ   | /s/ Axe | el E. Denk  | x   |
|     | Axel E  | . Denk  | Signature of Debtor 2   |
|     | Signatu | re of Debtor 1  |   |
|     | Date    | February 15, 2016   | Date  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-04634 Doc 1 Filed 02/15/16 Entered 02/15/16 13:08:58 Desc Main Document Page 44 of 50

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Northern District of Illinois

|        |  |   |  | Northern District of Immois  |   |                              |          |
|--------|--|---|--|--|---|------------------------------|----------|
| In re  | Axel E. Denk   |   |  | Debtor(s)  | Case No.                                | 7                            |          |
|        |  |   |  | Debtor(s)  | Chapter                                 |                              |          |
|        | DIS  | CLO   | OSURE OF COM   | MPENSATION OF ATTOR  | NEY FOR DI                              | EBTOR(S)                     |          |
|        | compensation paid t  | o me v  | within one year before th  | P. 2016(b), I certify that I am the attorn<br>he filing of the petition in bankruptcy,<br>lation of or in connection with the bank   | or agreed to be paid                    | to me, for services rendered | d or to  |
|        | For legal service  | es, I h   | ave agreed to accept   |  | \$                                      | 1,215.00                     |          |
|        |  |   |  | ceived   |   | 1,215.00                     |          |
|        | Balance Due  |   |  |  | \$                                      | 0.00                         |          |
| 2.     | The source of the co   | mpens   | sation paid to me was:   |  |   |                              |          |
|        | Debtor   |   | Other (specify):   |  |   |                              |          |
| 3.     | The source of compo  | ensatio   | on to be paid to me is:  |  |   |                              |          |
|        | ■ Debtor   |   | Other (specify):   |  |   |                              |          |
| 4.     | ■ I have not agree   | d to sł   | nare the above-disclosed   | d compensation with any other person u   | unless they are mem                     | bers and associates of my la | aw firm. |
|        |  |   |  | mpensation with a person or persons w<br>the names of the people sharing in the  |   |                              | m. A     |
| 5.     | In return for the abo  | ve-dis  | sclosed fee, I have agree  | ed to render legal service for all aspects   | s of the bankruptcy                     | ase, including:              |          |
|        | <ul> <li>b. Preparation and a</li> <li>c. Representation o</li> <li>d. [Other provision Negotiation agreement</li> </ul> | filing of the descriptions of the description of the descriptions | of any petition, schedule<br>debtor at the meeting of<br>eeded]<br>vith secured creditor | d rendering advice to the debtor in dete<br>es, statement of affairs and plan which<br>creditors and confirmation hearing, an<br>rs to reduce to market value; exe<br>eeded; preparation and filing of r<br>goods. | may be required;<br>d any adjourned hea | rings thereof;               |          |
| 6.     | Represen   | tatio   |  | osed fee does not include the following iny dischargeability actions, judio oceeding.  |   | es (except in Chapter 1      | 3        |
|        |  |   |  | CERTIFICATION  |   |                              |          |
| this b | I certify that the fore<br>bankruptcy proceeding   | going<br>1g.  | is a complete statement  | t of any agreement or arrangement for p  | payment to me for re                    | epresentation of the debtor( | s) in    |
| F      | February 15, 2016  |   |  | /s/ David M. Siege   | el                                      |                              |          |
| _      | Date .   |   |  | David M. Siegel  |   |                              |          |
|        |  |   |  | Signature of Attorney  David M. Siegel &   |   |                              |          |
|        |  |   |  | 790 Chaddick Driv  | ve                                      |                              |          |
|        |  |   |  | Wheeling, IL 6009<br>(847) 520-8100  | 00                                      |                              |          |

Name of law firm

#### Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
  - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
  - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
  - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
  - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

#### Important Bankruptcy Information

#### Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

#### Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;

Н.

- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

The FLAT FEE for representation in this matter will be \$ 1,550.00

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

| opportunity to ask questions regarding th | is agreement, is satisfied with it, and accepts it in its entirety. |
|---|---|
| Date: 2-12-16                             | Signed: X Oxel Dente  |
|   | Print: Axel Denk  |
|   |   |
| Date:                                     | Signed:   |
|   |   |
|   | Print:  |
|   |   |
| Date: 3/3/6 Sign                          | ned: Prest Al   |

Attorney for David M. Siegel

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## United States Bankruptcy Court Northern District of Illinois

|       |   | Northern District of Illinois                     |                                |                |
|-------|---|---|--------------------------------|----------------|
| In re | Axel E. Denk                              | <b>D</b> 1: ()                                    | Case No.                       |                |
|       |   | Debtor(s)   | Chapter <u>7</u>               |                |
|       | VI  | ERIFICATION OF CREDITOR N                         | MATRIX                         |                |
|       |   | Number o  | f Creditors:                   | 21             |
|       | The above-named Debtor(s (our) knowledge. | ) hereby verifies that the list of cred           | itors is true and correct to t | the best of my |
| Date: | February 15, 2016                         | /s/ Axel E. Denk Axel E. Denk Signature of Debtor |                                |                |

American Honda Finance 2170 Point Blvd., Ste. 100 Elgin, IL 60123

American Honda Finance 1220 Old Alpharetta Rd., Ste. 190 Alpharetta, GA 30005

AMEX
Bankruptcy Department
PO Box 981535
El Paso, TX 79998-1535

AMEX
Attn: Bankruptcy Department
PO Box 297871

Fort Lauderdale, FL 33329

Cabela's Visa Center World's Foremost Bank PO Box 82609 Lincoln, NE 68501-2609

Cap One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Capital One, N.A. PO Box 71083 Charlotte, NC 28272-1083

Citi Attn: Bankruptcy Department PO Box 6241 Sioux Falls, SD 57717 Citi PO Box 6500 Sioux Falls, SD 57117-6500

Citibank NA PO Box 769006 San Antonio, TX 78245

Discover Bank PO Box 15316 Wilmington, DE 19850

GECRB/SAMD PO Box 981416 El Paso, TX 79998

GECRB/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896-5060

Gemb/SAMDC Bankruptcy Dept. PO Box 103104 Roswell, GA 30076

Giovanni Santana-Denk 1820 N Spaulding Apt. 301 Chicago, IL 60647

US Bank 425 Walnut St. Cincinnati, OH 45202

US Bank Attn: Bankruptcy Dept PO Box 5229 Cincinnati, OH 45201-5229

US Bank 1200 Energy Park Drive Saint Paul, MN 55108 Worlds Foremost Bank N Po Box 82608 Lincoln, NE 68521